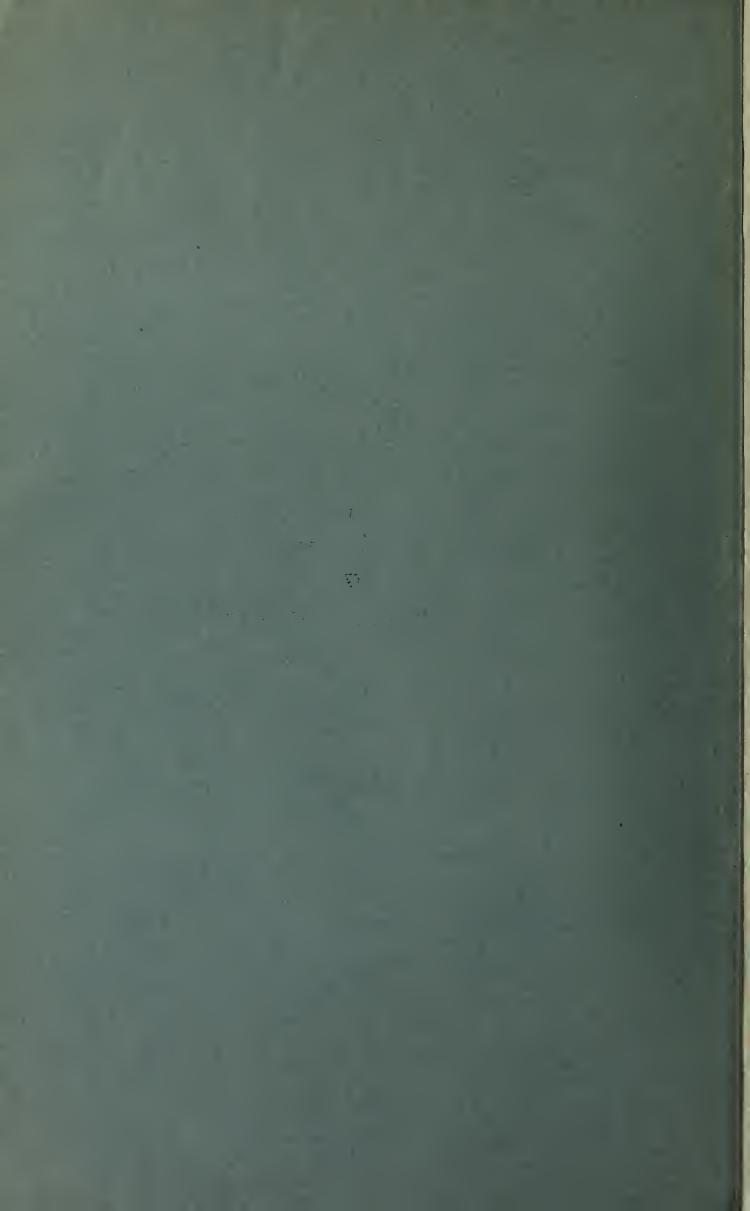
I

BLANDFORD RURAL DISTRICT.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH. - YEAR 1968



STAFF OF THE PUBLIC HEALTH DEPARTMENT.

MEDICAL OFFICER OF HEALTH

G.B. Hopkins, M.B., Ch.B., B. Pharm., D.P.H. holding appointments of:-

Senior Assistant County Medical Officer - Dorset, County Council. } 5/11th of time.

Medical Officer of Health - Blandford Rural District. Medical Officer of Health - Borough of Blandford Forum

Medical Officer of Health - Wimborne Minster Urban District.

Medical Officer of Health - Wimborne and Cranborne Rural District.

PUBLIC HEALTH INSPECTOR

P. D. Franklin, M.A.P.H.I., M.R.S.H.

MEMBERS OF THE PUBLIC HEALTH COMMITTEE.

COUNCILLORS:-

Miss A.G. Biddlecombe K.R. Browning. A.B.C. Davies. P.L. Farquharson (Ex-officio) C.F. House.

J.A. Woodhouse.

C.R.J. Mitchell (Ex-officio)
F.H.D.Mainwaring-Burton
C.B.C. Roe
S.R. Stenning
Major G.T. Wright.

MEMBERS OF THE HOUSING COMMITTEE.

COUNCILLORS: -

Mrs. M. Cossins
P.L. Farquharson (Ex-Officio)
R.C.J. Hayward.
Mrs. S. Hooper.
A.E. Lane.

F. Lewis C.R.J.Mitchell (Ex-Officio) S.A. Parker. Mrs. H.M. Ramsay C.B.C. Roe

R.J. Tory.

Area Office,
Health Centre,
Rowlands Hill,
Wimborne Minster.
Dorset.

Mr. Chairman, Ladies and Gentlemen,

I present my Annual Report for 1968.

I have often commenced with a short discussion on the subject of notifiable diseases and am pleased to say that this priority is becoming doubtfully justifiable. The whole subject was a very sad and gloomy one at the turn of the century, a fact which is not fully appreciated by to-day's young parents. The revolution which has occurred is based on three factors. First a huge advance in social circumstances due to better houses, more and better food and clothing and advancing enlightenment through education. Secondly, the enormous strides forward in prevention through the development of vaccines against the common childhood ailments, coupled with their vigorous application, and thirdly the great strides in curative medicine mainly through the discovery of antibiotics.

The first and last of these three factors has for many years reduced the mortality from measles, and now the second factor, specific prevention through vaccines has assumed its proper place.

In the quinquenial period 1962 to 1966 in England and Wales there were 434 deaths from measles, which is 100 more than the combined total of deaths from poliomyelitis, smallpox, diphtheria and whooping cough. The measles tide ebbs and flows biennially. The flood tide of 1961 produced $\frac{3}{4}$ million notifiable cases, the actual number probably being higher, even the ebb years produce about $\frac{1}{4}$ million. A national survey suggests that of these $\frac{1}{4}$ million cases 50,000 would require four or more visits by their doctor, and one in 15 would suffer from a potentially severe complication, for instance severe bronchitis or pneumonia in about 4%, middle ear infection in about 2.5% with just over 1% of all cases requiring admission to hospital. 4 in every 1,000 show evidence of inflammation of the brain and 1 per 1,000 actual encephalitis, with permanent mental and physical crippledom. These figures are quoted in detail in order to give an idea of the dividends to be obtained from the successful application of a measles vaccination campaign, which has already demonstrated its value in your district.

Indeed, we have every reason to be proud of the magnificent preventive and curative "umbrella" held over the modern child. There are unfortunately areas of neglect due to human failures as a glance at the/

Annual Reports of the N.S.P.C.C. will reveal, and there is always the sad and reproachful story of the neglect of childrens' teeth in the sphere of prevention. Far too much sticky sweet stuff continues to be chewed by most children and indeed teeth are the victims of a massive public apathy, how else can parental neglect of a good and regular diet and public neglect to fluoridate water supplies be explained? Alarming numbers of relatively young adults require full dentures but it is not sufficiently known that after many years, indeed up to three quarters of a lifetime in some cases, of erosion of jaw bone due to absence of teeth the prospect of good fitting dentures diminishes as time goes on.

It is the rule rather than the exception that even otherwise well informed parents continue to buy their childrens' teeth from them with pocket money, and at the same time fail to take enough interest in the subject of fluoridation to distinguish between fact and fancy.

The picture for the middle aged is not free from the effects of apathy.

In this age group 30% die from cancer and heart disease, 10% from strokes, 4% from violence (suicide, traffic, sport etc.,) and 7% from chronic bronchitis.

Smoking has a large impact on the proportion of deaths due to heart disease and chronic bronchitis. Lack of exercise and overeating are likewise important factors. Even in the case of traffic accidents it is apathy which determines that the majority of car occupants do not use safety belts.

That change in public attitudes is necessary is suggested by the fact that in Sweden middle aged men experience half the death rate of those in Scotland. In Norway the chances of survival from 65 to 85 are double those in England, and, nearer to home, France is improving her lead over Britain in the middle aged death rates. It is most likely that environmental factors play an important part in these differences and environmental factors are capable of modification.

My Report for 1967 advanced statistical evidence showing that the problem of suitable accommodation for the elderly was a growing one. The Council have provided more warden supervised dwellings for elderly people than any other Rural District in Dorset and yet there is still a waiting list, which effectively abolishes any suggestion that excessive provision has been made. Indeed this type of accommodation is so well established in y our district that there has been a/

snowball effect as more and more elderly people have seen friends and acquaintances moved to such accommodation, perhaps have visited them, but certainly have had some years in which to take full cognisance of them and to cogitate over the possibility of obtaining such accommodation for themselves. It is not therefore surprising that the Council have continued to plan for further dwellings of this nature. The actual density of warden supervised dwellings in Autumn, 1968, was over 10 per 1,000 population and 84 per 1,000 over 65s.

In medieval times the serf was bound to his parish because he was ostracised outside it, he could not get a job or a house if he moved. How strange that the modern council house tenant, prospective or actual, is in a similar If he has been on a waiting list for five years and wishes to move he must face the "stateless" status, so far as a council house is If he is in a council house and wishes to concerned, in the new district. move he has a very slender hope of transferring, slender indeed if his move is far, otherwise he is likely to have to stay willy nilly. The Seebohm report has put a case for housing authorities to be much larger, presumably advocating the abolition of district council housing functions. In a regional housing authority the council house tenant could at least move about in his region, but he still could not move far unless by close liaison between major authorities. Why not close liaison between district housing authorities to facilitate transfer of tenants, and preservation of eligibility and waiting list time for prospective tenants who move from district to district?

Another innovation in furtherance of social policy could profitably be made in the housing sphere, that is the power to attach earnings for payment of rent in that uncommon but difficult case where a housing committee is finally driven to consider eviction of a family after trying every means of obtaining rent. This power would be particularly valuable in the occasional hard case where a young family is involved, especially where the parents have become aware of a County Council rent guarantee and have decided to rest on their oars as a result.

There follows the report of the Public Health Inspector and the customary details and statistics.

& B. My Bun

SUMMARY OF VITAL STATISTICS.

| Area in acres | 61, | 717 |
|---|------|----------|
| Population as estimated by Registrar General - mid-year | 13, | 260 |
| Rateable value as at 1st April, 1968 | 375, | 183 |
| Product of 1d rate as at 1st April, 1968 | £1, | 427.12.0 |
| Estimated number of houses (Council and Private) at end of 1968 | 3, | 765 |

AS SUPPLIED BY THE REGISTRAR GENERAL

| BIRTHS | MALES. | | | FEMALES. | |
|--|-------------------|--|-------------------------------------|------------------------------------|--|
| Live Births 95 | Legitimate. 85 | Illegitimate. | Total. | | Illegit. 5 |
| Stillbirths | - | - | 2 | 1 | 1 |
| Deaths of Infants:- | | | | | |
| Under 1 year of age. 1 | 1 | - | 1 | 1 | t on |
| Under 4 weeks of age. 1 | 1 | - | 1 | 1 | |
| Under 1 week of age. 1 | 1 | - | 1 | 1 | sect |
| Contraction and an observations are accompanies as a contraction of the contraction of th | | erendere in erende spirit den de | Paul and Paris Princip Paris (1980) | alliust marram i Kasimaliningsking | подвитительной структический с |
| DEATHS | Total | Male. | | Female. | |
| Total registered | 115 | 58 | | 57 | |
| | Blandf Rural | ord District. Eng | land & | Adminis C | trative ounty |
| Standardised Birth Rate. | 17. | | 6.9 | | 7.1 |
| Standardised Death Rate. | 10. | 1 | 1.9 | 1. | 1.0 |

COMPARABILITY FACTORS.

| BIRTHS. | • | • | | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | • | 1.22 |
|---------|---|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|------|
| DEATHS. | | | | | | | | | | | | | | | | | _ | | | | 1.17 |

SECTION A

PUBLIC HEALTH LABORATORY

The Public Health Laboratory is situated in Dorchester and provides an excellent free service for the bacteriological examination of human specimens, food, milk and water.

AMBULANCE FACILITIES.

The Ambulance Service is provided by the Dorset County Council. Control is centralised in Dorchester and the service operates from Castleman House.

MATERNITY AND CHILD WELFARE SERVICES.

Dorset County Council provided an Infant Welfare Clinic once a month in the Health Centre in Blandford where other services are also grouped, including the school dental service for the area, speech therapy, audiometry, family planning, special examinations, cervical cytology, chiropody for the elderly, ante-natal classes and the home help organiser.

The area health visitors are based on this clinic. The registrar of births and deaths attends the clinic three times weekly.

HOME HELP SERVICE.

A local organiser attends to the detailed administration of this valuable service and is at the Health Clinic from 9 to 9.30 during weekdays.

SECTION B PREVALENCE OF INFECTIOUS DISEASES.

TUBERCULOSIS

The number of cases on the register are as follows:-

| PULMONARY | | NON-PULMONARY | |
|-----------|----|---------------|-----|
| Males | 12 | Males | Nil |
| Females | 7 | Females | 1 |

| VACCINATION AND IMMUNISATION | | | | | | | | | | |
|------------------------------|-------------|-------|--------|------|-------|--------|--|-------|-----|--|
| | STATISTICS. | | | | | | | | | |
| Poliomy | elitis. | Dipht | heria. | Teta | anus. | Whoop: | ing C. | Small | pox | |
| Oral Ba | sic Course. | _ | _ | | | | | | | |
| P. | R. | P. | R. | P. | R. | P. | R. | Р. | R. | |
| 219. | 327. | 209 | 437 | 259 | 537 | 194 | 206 | 211. | 139 | |
| | | | Measlo | 08. | | | and the state of t | | | |

| Malignant neoplasm - stomach | | |
|---------------------------------------|-----|---------|
| Malignant neoplasm - lung, bronchus | ļ | - |
| | 2 | - |
| Malignant neoplasm - breast | - | 3 |
| Other malignant neoplasms, etc | 1 | 5 |
| Benign and unspecified neoplasms | - | 1 |
| Diabetes mellitus | - | 3 |
| Other endocrine etc. diseases | 1 | - |
| Mental Disorders | 1 | - |
| Other diseases of nervous system. etc | 1 | - |
| Chronic rheumatic heart disease | 1 | |
| Hypertensive disease | ••• | 4 |
| Ischaemic heart disease | 20 | 9 |
| Other forms of heart disease | 4 | 6 |
| Cerebrovascular disease | 12 | 9 |
| Other diseases of circulatory system | 3 | 3 |
| Influenza | - | 2 |
| Pneumonia | 2 | 4 |
| Bronchitis and emphysema | 5 | - |
| Intestinal obstruction and hernia | - | 1 |
| Cirrhosis of liver | 1 | _ |
| Other diseases of digestive.system | _ | 1 |
| Other diseases, genito-urinary system | - | 2 |
| Diseases of musculo-skeletal system | 1 | _ |
| Congenital anomalies | 1 | 1 |
| Symptoms and ill- defined conditions | - | 1 |
| Motor vehicle accidents | - | 1 |
| All other accidents | - | 1 |
| All other external causes | . 1 | - |
| | | |

Total..... 58 57

GENERAL

The new refuse tip and increased collection service continued to account for a major part in the work of the Department through 1968. Some early amendments to services were necessary but generally the weekly collection settled down very rapidly and work on the tip began to take on a definite pattern. The unexpected bout of hot weather at Easter time caused an outbreak of flies on the tip site but these were rapidly treated and a daily programme of spraying instituted which has completely cured any trouble in this respect. In general the tip is one of which any Local Authority could be proud as all Model Recommendations are adhered to strictly, constant surveillance against any infestation by rodents or insects is maintained and generally the only signs of work being the one tipping face which is usually covered completely at the end of the day.

For some time it had been apparent that the B.85 Loader, although doing an excellent job, was being called upon to work well over its capacity and in the Autumn the Guncil purchased a B.125 Loader, the earth moving capacity of which has completely resolved any problems of maintaining trenches in advance of tipping need. In the early summer a part of the tip site was let to a local vehicle dismantler on the understanding thathe would abide by certain minimum conditions regarding the conduct of his business on the land, etc., but after some months of tenancy it became obvious that the area allocated to him was being considerably neglected, there being 50 vehicle bodies on the site at the end of September causing a very unsightly appearance and attraction to pilferers. The tenant was subsequently given notice to quit after repeated requests to better the site but the position was unchanged at the end of the year.

A certain amount of trouble was experienced in the early summer where the small capacity of the bull-dozer could not cope with heavy beds of flints and chalk. An Army team attended from a nearby Carp as an exercise and were of great assistance in loosening several trenches with the use of explosive charges. A small incinerator was built on the site by direct labour to deal with some of the bulky items of refuse and with a view to ascertaining the possibilities of a larger unit at some future date. It has worked surprisingly well and some lessons have already been learnt from it.

In May a housing survey of the Rural District was commenced with a view to assessing the present number of sub-standard houses in the district, those without water supply or drainage, and the potential number of new dwellings /

likely to be required over the next decade bearing these factors in mind.

Generally the picture is not without its comfort, the survey having been conducted this far at approximately one village per month on an alphabetical basis and showing that the general standard of housing is rather better than anticipated. As substandard dwellings come to notice they are being dealt with immediately and a considerable measure of co-operation has been experienced from the various owners.

The Council continue to undertake the clearance of septic tanks, a contract being negotiated and signed with Messrs. C.W. Harrison (Western) Ltd. This particular service has not been without its shortcomings and at times the waiting list of householders requiring emptyings has been unduly long. In fairness to the Contractors it must be said that they have had great difficulty in obtaining sufficient labour in this area, a problem which still Even though the service is a comparatively recent institution besets them. by the Council the "up to two emptyings per annum" extended by them has in many instances been taken as a norm by householders, many of whom do not realise that most septic tanks function best when left alone for a long period. Certain parts of the district have their own problems, notably Charlton Marshall, where the sub-soil will not admit of effluent in any quantity and as the dwellings in this area are of relatively high density compared with most other parts of the Rural District it is here that most of the delays have been all too apparent.

At the end of 1967 the Council's Rodent Officer, Mr. Malcom, retired and was replaced in February, 1968, by Mr. Hole who has conducted his activities with considerable zeal and the rodent problem of the area continues to be well contained.

FOOD HYGIENE

There were no prosecutions during the year. Regular sampling of ice cream, cream and other foodstuff was carried out and results were preponderantly satisfactory.

The following food-stuffs were found on examination to be unfit and certificates were issued after voluntary surrender:-

Canned Tomatoos..... 49 lbs.

The condemned food was taken to the tip at Stourpaine and incincrated,

| SAMPLES | SUBMITTED | FOR | BACTERIOLOGICAL EXAMINATION |
|---------|-----------|-----|-----------------------------|
| | | | |

| | Sat. | Un.Sat. | Suspect. | Prov.l. | Prov.2. | Pathogene Isolated. | Total. |
|--|---|--|---|--|-------------------------|--------------------------------------|------------------|
| Drinking Water | 6 | 2 | - | - | | - | 8 |
| Swimming Baths | 3 | - | - | ••• | - | - | 3 |
| Clotted Cream | 1 | - | - | - | - | - | ı |
| Fresh Cream | 1 | - | - | - | - | - | 1 |
| Ice Cream | 16 | - | - | 16 | 2 | - | 18 |
| Ice Lolly | 1 | - | - | - | - | - | 1 |
| Meat Pies | 1 | - | - | - | - | - | 1 |
| Effluent Swabs | 2 | • | - | - | - | - ' | 2 |
| Effluent | 2 | - | - | - | - | - . | 2 |
| Faeces | 2 | - | *** | - | - | 1 | 3 |
| (b) With (c) With (2) By other person (a) With | ority. State Ass State Ass hout State ons h State As | istance f istance f Assistan sistance. Assistan | Cor rehous: | purposes | •••••• | | . 29 |
| | | | | | | • • • • • • • • • • • • • | . 25 |
| | | | | | | • • • • • • • • • • • • • | |
| Housing Action | p 0 00 | | | | | | •)) |
| (2) Numb (3) Numb (4) Numb (5) Mumb (6) Numb | er of Stater of Stater of houser of | cutory Not cutory Not ses in res ses demoli ses in res | tices serv tices comp spect of w shed in p spect of w | ed lied wit hich Dem ursuance hich und | h olition of Demo | orders made lition Orders s accepted | 0 0 0 1 |

| FACT | ORIES | | | | Number Registe | A STATE OF THE PARTY OF T | 12 |
|------|---|--------------|-----------|--|-------------------|---|---|
| (1) | Factories in whare enforced by | | | | 1 | | 1 |
| (2) | Factories not in 7 is enforced by | | | | 39 | | 21 |
| (3) | Other premises in by Local Authoripremises) | ty (excludio | ng out-wo | rkers | bed O | | 0 |
| CASE | S IN WHICH DEFECT | s were foun | D:- | | | | |
| Part | iculars. | | <u> </u> | lumber of | f cases fou | in which def nd | ects were |
| | | Found. | Remedied. | Children of the last of the la | G0071450 | By H.M. Inspector. | Number of cases in which prosecution instituted |
| | of nlinesstion 1) | 1 | 1 | - | | 1 | |
| | crowdingtion 2) | | | - | | - | - |
| vent | equate ilationtion 4) | •• | - | - | | - | - |
| Temp | asonable erature tion 9) | | - | - | | - | - |
| OFFI | CES, SHOPS AND RA | ILWAY PREMIS | SES ACT, | 1964 | | | |
| | new premises was a ingements in the | | | | | e were no de reported acc | |

SEPTIC TANKS

The number of septic tanks emptied during the year was 533

| SALVAGE The Depot, "Nordon" | | |
|-----------------------------|---------------|----------|
| | Copper | £4. 0. 0 |
| | Rags | 11. 4. 0 |
| | Alluminium | 15. 0. 6 |
| | Batteries etc | 4.16. 0 |
| | Brass | 7. 7. 9 |
| | Iron | 29. 0. 0 |
| STOURPATNE TTP | | |
| DIOURAINE III | Heavy Iron | 18.17. 0 |
| | Light Iron | 8.12. 6 |

| PREVENTION OF DAMAGE BY PESTS ACT. | |
|--|--------------|
| Number of initial visits | Total 660 |
| Number of re-visits | 453 |
| Major infestations (Rats) | 45 |
| Major infestations (Mice) | 11 |
| Minor infestations (Rats) | 186 |
| Minor infestations (Mice) | 43 |
| Visits for other reasons | 14 |
| | |
| | |
| SUMMARY OF VISITS DURING THE YEAR. | 0.5 |
| Building regulations | 85 |
| Housing Act | 617 |
| Public Health | 127 |
| Food Hygine | 20 |
| Refuse Collection | 259 |
| Meetings | 25 |
| 0.S.R. Act | 17 |
| Other visits | 75 |
| Interviews | 15 3 |
| Petroleum | 32 |
| Pet Animals | 3 |
| Water Supplies | 39 |
| Magistrate's Court and Quarter Sessions. | 3 |
| Rodent Control | 32 |
| Clean Air Act | 17 |
| Offensive Trades | 9 |
| Food and Drugs | 46 |
| Disinfestation | 1 |
| Pediculosis Town and Country Planning Act | 5 1 |
| Noise Abatement Act | 14 |
| Informal Sampling Factories Act | 27 11 |
| Infectious Diseases | 17 5 |

•••••

. . . .

. .



